- Operationalising Community Health Centres as First Referral Units (FRUs) and 50% of all Primary Health Centres for providing 24x7 services.
- Augmenting the availability of skilled manpower by means of different skill-based tranings such as for providing Skilled Attendance at Birth.
- Training of MBBS Doctors in Life Saying Anaesthetic Skills and Emergency Obstetric Care including Caesarean Section.
- Strengthening of CHCs for first referral care -Provision of Emergency Obstetric and Neonatal Care at FRUs & Training of MBBS Doctors in Life Saving Anaesthetics Skills for Emergency Obstetric Care.
- Supplementary nutrition to pregnant and lactating mothers.
- National nutrition anaemia prophylaxis programme.
- Basic newborn care including care at birth-protection from hypothermia, infection and early initiation of breastfeeding and resuscitation.
- Immunization.
- Infant and young Child Feeding (Exclusive breastfeeding for 6 months and timely introduction of complimentary feeding).
- Vitamin A+ supplementation.
- Iron and Folic Acid supplementation.
- Integrated Management of Neonatal and Childhood Illness (IMNCI) and Facility based-IMNCI (F-IMNCI) for early detection and appropriate management of common childhood and neonatal illness as the facility as well as the community.
- Management of Acute Respiratory Infection (ARI), Diarrhoea among new born and under five children.

Shortage of qualified doctors

526. SHRI RAJEEV SHUKLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is acute shortage of qualified doctors in rural areas of the country;

(b) if so, to what extent;

(c) whether it is a fact that in India, there is only one doctor for every 1500 patients whereas World Health Organisation (WHO) recommends a doctor for every 250 patients;

(d) whether any plan has been chalked out for a separate cadre of doctors who will work only in villages; and

(e) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (e) There is indeed shortage of critical human resources in the public health delivery system in some states in the country especially in rural areas. The shortages are against the positions of specialists, medical officers, staff nurses and other paramedics. In many states the number of positions sanctioned for various specialities need to be increased to provide optimum numbers at all levels. The Indian Public Health Standards have prescribed higher HR requirements at all levels and under NRHM states have undertaken various measures to overcome these shortages.

As per WHO there are no standards for assessing the sufficiency of health work force and an appropriate skill mix is desirable to ensure numeric and skill adequacy.

As per the World Health Statistics 2009, published by the WHO there are 1.9 service provider (including doctors, nurses and midwifery personal) per 1000 population in India.

The State Governments have taken several steps to compensate the gaps in availability of health human resources. However a separate cadre of doctors who will work only in villages is not being planned by any state.

Mandatory pictorial warnings on packets of cigarettes and beedies

527. SHRI M.V. MYSURA REDDY:

SHRI PENUMALLI MADHU:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government has issued orders mandating the manufacturers for pictorial warning on packets of cigarettes and beedies;

(b) if so, the details of the specifications;

(c) whether it has come to the notice of his Ministry that many companies are not following the mandatory warning on the 40 per cent of the total area of the packet;

(d) if so, the details of such instances and action that has been taken on such companies and products; and

(e) what measures Government is taking to provide smoking zones at various places?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI S. GANDHISELVAN): (a) and (b) Yes. The Government of India has notified "the Cigaretes and Other Tobacco Products (Packaging and Labeling) Rules, 2008" *vide* GSR No. 182 dated 15th March, 2008. These rules came into force from 31st May, 2009. As per these Rules, every package of cigarette or any other tobacco product sold in the country shall *inter-alia* have the Specified Pictorial representation of ill effect of the tobacco use.

The specified health wanting should occupy at least forty percent (40%) of the pricipla display area of the front panel of the pack.